**ACADEMIC APPEAL APPLICATION FORM**

Please read the Women's College Academic Policy and Academic Appeal Application Guidelines before lodging your appeal.

Complete this form and include / attach any relevant, supporting documentation. Submit completed form and documentation to the Vice Principal by the due date published on Woogle.

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| --- | --- | --- | --- | --- |
| **DETAILS** |  |  |  |  |
| **Given Name:** |  |  | **Last Name:** |  |
| **Address:** |  |
|  |  |
| **Mobile:** |  |  | **Email:** |  |
| **Year at College:** |  |  | **Year of Degree:** |  |
| **Degree:** |  |

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| **SUMMARY OF APPEAL** |
| Please provide a summary of your appeal in the space below, stating reasons as to why the College should consider reinstating your Residency / Affiliate status, based on the criteria outlined in the Academic Policy and Academic Appeal Application Guidelines.Please indicate if you have applied for Special Consideration and or Disability Services with the University and state what provisions the University has made for you. **YES / NO** |
| See attached email correspondence. |

I have attached all relevant, supporting documentation, as per the Academic Appeal Application Guidelines, with this application.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Signature:** |  |  | **Date:** |  |

|  |  |  |
| --- | --- | --- |
| Document Title: | Document Number: | Effective Date: |
| Academic Appeal Application Form | TWC-STU-D07Version 2.0 | February 2018Reviewed: November 2021Reviewed: February 2023Revised: November 2023 |

**Dr Tiffany Donnelly**

**Principal**